



Office of Racing Commissioner
PO Box 30773
Lansing, MI 48909
Phone: (517) 335-1420
Fax: (517) 241-3018
www.michigan.gov/horseracing

Office of Racing Commissioner STABLE ROSTER – MIXED BREED

Any changes regarding information noted on this form must be made within 48 hours of that change.

Track	Date
Barn	

SECTION I CONTACT INFORMATION

Trainer Name	Trainer Phone ()
Street Address	City / State / Zip
Training Facility	Facility Phone ()
Facility Address	City / State / Zip

SECTION II ASSISTANT TRAINER

Assistant Trainer Name

SECTION III OWNERS

1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

SECTION IV GROOMS

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

SECTION V RESTRICTED AREA PASSES / EXERCISE RIDERS / ETC.

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

R 431.1055 Occupational licensing standards; individuals.

Sec. 6 Trainers and vendors operating within restricted areas of licensed racetracks shall ensure that they and their employees are licensed. Additionally, a trainer shall ensure that each owner for whom he or she trains applies for licensing. A horse in a trainer's care shall not start in a race unless at least a temporary application for the owner's license is on file with the Commissioner.

SECTION VI HORSES UNDER CARE		CHECK (Arab, Paint, Quarter, Thoroughbred)
NOTE: All horses entered in a race must be stabled at the listed training site and be available for inspection.		
1.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
2.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
3.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
4.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
5.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
6.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
7.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
8.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
9.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
10.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
11.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
12.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
13.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
14.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
15.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
16.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
17.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
18.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
19.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
20.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
21.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
22.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
23.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
24.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
25.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
26.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
27.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
28.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
29.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T
30.		<input type="checkbox"/> A <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> T

R 431.1055 Occupational licensing standards; individuals.

Sec. 10 It shall be a trainer's responsibility to maintain on file with the commissioner an up-to-date roster of owners, employees, and any others having access to the trainer's assigned premises. The roster shall contain all information considered pertinent by the commissioner.

I have read the foregoing, the Horse Racing Law of 1995 (Act 279, Public Acts of 1995, as Amended) and the Racing Commissioner General Rules and I understand my responsibilities.

ORC Witness / Date	Trainer Signature / Date
--------------------	--------------------------